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<b>FEE TRANSMITTAL</b> For FY 2005		<b>Complete if Known</b>	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)		Application Number	09/940,529
		Filing Date	August 29, 2001
		First Named Inventor	TAKAYUKI OGASAHARA ET AL.
		Examiner Name	Twyler M. Lamb
		Art Unit	2622
		Attorney Docket No.	01272.020470
<input type="checkbox"/> Applicant claims small entity status. See 37 C.F.R. 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	0.00	

**METHOD OF PAYMENT** (check all that apply)

☐ Check   ☐ Credit Card   ☐ Money Order   ☐ None   ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account   Deposit Account Number: 06-1205   Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17   ☒ Credit any overpayments

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**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity		Small Entity		Small Entity		
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

**Total Claims**   **Extra Claims**   **Fee (\$)**   **Fee Paid (\$)**   **Multiple Dependent Claims**

27 - 20 or HP = 0 x 0 = 0   **Fee (\$)**   **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20   0   0

**Indep. Claims**   **Extra Claims**   **Fee (\$)**   **Fee Paid (\$)**

10 - 3 or HP = 0 x 0 = 0

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
<u>          </u> - 100 =	<u>          </u> / 50 =	<u>          </u> (round up to a whole number) x	<u>          </u>	<u>          </u>

**4. OTHER FEE(S)**

Non-English Specification,	\$130 fee (no small entity discount)	<b>Fees Paid (\$)</b>
Other:		

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent) 30,110	Telephone 202-530-1010
Name (Print/Type)	Lawrence A. Stahl	Date: April 15, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.